

PART B - FEE(S) TRANSMITTAL

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27581 7590 09/16/2008

MEDTRONIC, INC.
 710 MEDTRONIC PARKWAY NE
 MINNEAPOLIS, MN 55432-9924

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| | |
|---------------|--------------------|
| Susan Nenaber | (Depositor's name) |
| Susan Nenaber | (Signature) |
| 12-2-08 | (Date) |

| | | | | |
|-----------------|-------------|----------------------|---------------------|------------------|
| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|

10/7/18,204

11/20/2003

Jordan D. Honcek

P0020462.00

9800

TITLE OF INVENTION: NOVEL JUNCTION FOR MEDICAL ELECTRICAL LEADS

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|-------------|--------------|---------------|---------------------|----------------------|------------------|----------|
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|-------------|--------------|---------------|---------------------|----------------------|------------------|----------|

nonprovisional

NO

\$1440

\$300

\$0

\$1740

12/16/2008

| | | |
|----------|----------|----------------|
| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|----------|----------|----------------|

MANUEL, GEORGE C

3762

607-122000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Carol F. Barry

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Medtronic, Inc.

Minneapolis, Minnesota

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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